PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

plication or Docke: Number

10/511841

Effective October 1, 2003												} 1		
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY OTHER THAN TYPE OF SMALL ENTITY					
TOTAL CLAIMS								RATE	FEE] .	RATE	FEE		
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FE	Ε	OR	BASIC FEE	950		
TOTAL CHARGEABLE CLAIMS			jΥ minus 20=		• .			XS 9=		OR	X\$16=	,		
INDEPENDENT CLAIMS			3 minus 3 =					X43=		OR	×86=	•		
M	ULTIPLE DEPE	NDENT CLAIM P	RESENT			וַ וַ		-145=		OR	-290=	Ì		
• 1	f the difference	e in column 1 is	less than zero, enter "0" in column 2					TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A	10 45	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESE EXTR			PARE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 14	Minus	- 26	9				X3.9=		OR	X\$18=		
ME	Independent	1.3	Minus	1 C)	<u> </u>	otin oti		X43=		OR	X86=	/	
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM		لـــا	7	+145=	7	OR	+290=		
•									TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	•	
(Column 1) (Column 2) (Column 3)														
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	-	HIGHE NUMB PREVIO PAID F	ER USLY	PRESE EXTR			RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	·		X\$ 9=	٠.	OR	X\$18=	1	
	Independent	NTATION OF MU	Minus	ONDENT	CLAIM	-		ľ	X43=	·	OR:	X86=		
	rinsi Prese	NIAHON OF MO	CITE DE	ENDENT	COAIM	<u> </u>	بــ		+145=		OR	+290=	· ·	
					•		٠.	- - A	TOTAL DDIT, FEE	•••	OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)														
AMENDMENT C	٠	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	ER JSLY	PRESEN EXTRA		ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		2		Γ	X\$ 9=		OR	X\$18=	•	
	Independent	•	Minus	***	•			ŀ	X43=			X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	PENDENT (CLAIM						OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **ADDIT. FEE														
	f the "Highest Nur	nber Previously Pai nber Previously Pai ber Previously Paid	d For IN THI	S SPACE is	less than	3, enter "	3.*	-	DOIT. FEE	ropriate box		IDDIT. FEE L		

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